.4031210648

FE5AN018

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIVED

2014 AP 3 1 1 2014 AP 3 1 2014

1.	NAME OF COMMITTEE (in full)	TYPE OR PRINT		Example: If typing, type over the lines.	12FE4M5MA	IL CENTER
	COMMITTEE	TO ELECT	LEYVA FOR	U.S. CONGRESS		, _;
		i				
			4th Stree		· · · · · · · · · · · · · · · · · · ·	
AD	DRESS (number and street)	<u> </u>				
	Check if different than previously reported. (ACC)	Highl	and		IN 463	
2.	FEC IDENTIFICATION N	JMBER ▼	CITY		STATE A	ZIP CODE A STATE ▼ DISTRICT
	C 0 0 3 5 7 4 3	4	3. IS THIS REPORT	NEW (N) OR	AMENDED (A)	IN .0·1
4.	TYPE OF REPORT (Ch. (a) Quarterly Reports: April 15 Quarterly F	Report (Q1)	(b) 12-Day P	RE-Election Report for the Primary (12P) Convention (12C)	ne: General (12G) Special (12S)	Runoff (12R)
	October 15 Quarter		Election	د د د ه		in the State of
	January 31 Year-Er	d Report (YE)	(c) 30-Day P	OST-Election Report for	the:	
				General (30G)	Runoff (30R)	Special (30S)
	Termination Report	(TER)	Election	w		in the State of
Typ Sig	Covering Period (Covering Period (Coveri	Mark	the best of my J. Leyva	Leyra	is true, correct and corr	oplete.
	Office Use Only				F	EC FORM 3 Revised 02/2003)

Γ 	FEC Form 3 (Revised 02/2003)	SUMMARY PAGE of Receipts and Disbursements	Page 2
W	Vrite or Type Committee Name COMMITTEE TO EI	ECT LEYVA FOR U.S. CONGRESS	
R	Report Covering the Period: From:	81 61 2614 To:	b, 3 / 3,1 / 2, b, 1, 4
		COLUMN A This Period	COLUMN B Election Cycle-to-Date
6.	Net Contributions (other than loans)		
	(a) Total Contributions (other than loans) (from Line 11(e))	5000	50,00
	(b) Total Contribution Refunds (from Line 20(d))	<u>.</u>	
	(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	5,0,0,0	500
7.	Net Operating Expenditures	-	
	(a) Total Operating Expenditures (from Line 17)	7.9.60	7.960
	(b) Total Offsets to Operating Expenditures (from Line 14)		L
	(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	7.9.6.0	7.9.6
8.	Cash on Hand at Close of Reporting Period (from Line 27)	22877	
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		

For further information contact:

5884305

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

10. Debts and Obligations Owed BY the Committee (Itemize all on

Schedule C and/or Schedule D)

4031210650

DETAILED SUMMARY PAGE

of Receipts

Page 3

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

COMMITTEE TO ELECT LEYVA FOR U.S. CONGRESS

Report Covering the Period:

From:

Ol'Ol'ZolY

03 31 2014

		I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11.	co	NTRIBUTIONS (other than loans) FROM:		
	(a)	Individuals/Persons Other Than		
		Political Committees	and the section of th	
		(i) Itemized (use Schedule A)	50.00	,50.00
		(ii) Unitamized	A	A
		(ii) Uniternized	A committee of the comm	
		(iii) TOTAL of contributions from individuals	0	
		non nordals	The state of the s	handards to be the standard of
	(b)	Political Party Committees	$\boldsymbol{\varphi}$	0
	(c)	Other Political Committees		
	(0)	(such as PACs)	$\boldsymbol{\Theta}$	0
		(600)		And the second s
	(d)	The Candidate		-6
	(e)	TOTAL CONTRIBUTIONS	a arang ang katang paga diputat berapada panterang binat. Pakatang ang a	Paramatananda and Danielament annilla anatomas Paramatanan
		(other than loans)	Eministration with modern contraction of months and transfer and transfer and partial	her tearlemberatures order dischargement
		(add Lines 11(a)(iii), (b), (c), and (d))	5000	50,00
12.	TRA	ANSFERS FROM OTHER	 4. As discussion of months of the profession of the p	
		THORIZED COMMITTEES		
13.	LO	ANS:		
		Made or Guaranteed by the	Landsterminer framinas se seferestinas fanalematicas d	Bernellinenskenrellenenskenrellenentlenen fram allemet i. a. s.
	,	Candidate	20000	20000
			the second s	
	(b)	All Other Loans		-0-
	(c)	TOTAL LOANS	And the second s	
		(add Lines 13(a) and (b))	0.000	200.00
14.	OFF	SETS TO OPERATING		
		PENDITURES		the state of the s
	(Ref	funds, Rebates, etc.)	le condition the other description description of the other description	
15.	OTI	HER RECEIPTS		
		ridends, Interest, etc.)		
16.	TO	TAL RECEIPTS (add Lines		
	11(6	e), 12, 13(c), 14, and 15)	25000	25000
	(Ca	rry Total to Line 24, page 4)	\$5000	

DETAILED SUMMARY PAGE

of Disbursements FEC Form 3 (Revised 02/2003) Page 4

II. DISBURSEMENTS		II. DISBURSEMENTS		LUMN A his Period	COLUMN B Election Cycle-to-Date			
17.	OP	ERATING EXPENDITURES	٠. •	, 79.60	. 1	, 79.60		
18.		ANSFERS TO OTHER THORIZED COMMITTEES		, 0	9-	, .		
19.		AN REPAYMENTS: Of Loans Made or Guaranteed by the Candidate	7	, o .	,	, -0 .		
	(b)	Of All Other Loans TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	,	, O .	, ,	, O . , O .		
20.	(a)	FUNDS OF CONTRIBUTIONS TO: Individuals/Persons Other Than Political Committees Political Party Committees Other Political Committees (such as PACs)	, ,	, O . , O .	, , , , , , , , , , , , , , , , , , ,	, O. , O .		
	(d)	TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	,	, <i>O</i> .	,	, -0 .		
21.	ОТН	HER DISBURSEMENTS	,	, <i>O</i> .	. 5	, O.		
22.		TAL DISBURSEMENTS d Lines 17, 18, 19(c), 20(d), and 21)	 *	, 79.60	3	, 79.60		
		III. CASH SU	JMMARY					
23.	CAS	SH ON HAND AT BEGINNING OF REPO	RTING PERIOD		,	, 58.37 , 2 50,00		
24	тот	TAL RECEIPTS THIS PERIOD (from Line	16, page 3)		9 · ·	, 2 50,00		
25 .	SUE	BTOTAL (add Line 23 and Line 24)				,308,37		
26.	тот	TAL DISBURSEMENTS THIS PERIOD (fro	om Line 22)		,	, 79 60		
27.		SH ON HAND AT CLOSE OF REPORTIN			9	, 228.77		

SCHEDULE A (FEC Form 3)

Use separate schedule(s)

FOR LINE	NUMBER:	PAGE	OF	
(check only	one)			
X 11a	11b	11c	11d	
12	13a	13b	14	15

for each category of the Detailed Summary Page	X 11a 11b 11c 11d 11d 12 13a 13b 14 15
	son for the purpose of soliciting contributions o solicit contributions from such committee.
T LEYVA FOR U.S. CONGRESS	
1 (-	Date of Receipt
State Zip Code	02 11 2014
	Amount of Each Receipt this Period
Engineer	, , 50.00
ection Cycle-to-Date , 50.00	Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(i)/441a-1)
	Date of Receipt
	M W / C C / W W
State Zip Code	
C 0 0 3 5 7 4 3 4	Amount of Each Receipt this Period
ccupation	3 3
lection Cycle-to-Date	Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(l)/441a-1)
	Date of Receipt
	M M / D D / Y Y Y
State Zip Code	
C 0 0 3 5 7 4 3 4	Amount of Each Receipt this Period
ccupation	, ,
	The and address of any political committee to the control of the c

SCHEDULI	ΕB	(FEC	Form	3)
ITEMIZED	DISE	BURSE	EMEN'	TS

Use separate schedule(s)

FOR LIN	E NUMBE	R: P/	AGE /	OF	2
(check o	nly one)	_		_	_
	X 17	18	19a] 19t
<u> </u>	20a	20b	20c		21

ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	F	X 17 20a	F	18 20b	-	19a 20c	19b
Any information copied from such Reports and Statements or for commercial purposes, other than using the name and			r the pur		e of solic		contribu	utions
NAME OF COMMITTEE (In Full)				_				
COMMITTEE TO ELECT LEYVA FOR U.S	• CONGRESS							
Full Name (Last, First, Middle mittar) A. Postmaster		Dat	e of Disl					
Mailing Address Highland Bran		Ö)	0	2.	011	1
City Highland IN	Zip Code 46322				n Disburs			
Purpose of Disbursement FEC Postage	0.0.1		-Caralina	D-ma	den nie er T	i mari	_5_	60
Candidate Name	Category/ Type	_			d or Disp			
Senate Primar					F.R. 400.5		. 5.11	
Full Name (Last, First, Middle Initial)			te of Dis	hı	ieme-*			_
B. Highland Pack & Mailing Address 9445 Indianapol	Parcel 1	_ Da	N /	3	D /	Z	01	7
City 11:11 0 State		Am	ount of		h Disburs			Period
Purpose of Disbursement Camp. Bus. C	46322 Pards 0.0.6			ĝ.		hered bered	5.3.	<i>5</i> ,0
Candidate Name Mark J. Le	Category/ Type	2		ef. ···	nd or Disp	20	al of F∷	Acc
Office Sought: X House Disbursement F Senate Primar	or:		С	ontr	nd or Dispributions .F.R. 400.	Req		
Full Name (Last, First, Middle Initial)			to of D	,b.			7	
c. First Financial	Bank	Da M	te of Dis	sour.	sement	T-	mark Transfer	Magnic (C)
Mailing Address 300 High St.			2	2	9	<u>レ</u>	0.1	J.
City Hamilton OH	Zip Code 45012	An	nount of	Eac	h Disbur	sem	ent this	Period
Purpose of Disbursement Bank Service Cha		Part and a second		Æ.	-5	Daniel	1.8.	0.0
Candidate Name Mark J. Ley	Category/ Type		E	}ef∷	nd or Die	Due	al of Evo	:65a
Office Sought: X House Disbursement F Senate Primar			Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53					
			n prompter	27.00		عدم	77	10
SUBTOTAL of Disbursements This Page (optional)				A.				
TOTAL This Period (last page this line number only)				.				[

SCHEDULE B (FEC Form 3)

PAGE 2 OF 2 FOR LINE NUMBER: Use separate schedule(s) (check only one)

ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 17 18 19a 19b 20a 20b 20c 21
Any information copied from such Reports and Statements m or for commercial purposes, other than using the name and a	ay not be sold or used by any peaddress of any political committee	erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)		
COMMITTEE TO ELECT LEYVA FOR U.S.	CONGRESS	
Full Name (Last, First, Middle Initial)		Date of Disbursement
AAristotle Intern	ational	
Mailing Address 3625 Ruffin Ro	l, Surte 100	02/12/2014
San Diego CA	Zip Code 92123	Amount of Each Disbursement this Period
Purpose of Disbursement Contribute Page Candidate Name		2.50
Mark J. Ley	Category/ Type	Refund or Disposal of Excess
Office Sought: X House Disbursement For Senate Primary		Contributions Required Under 11 C.F.R. 400.53
Full Name (Last, First, Middle Initial)		
В.		Date of Disbursement
Mailing Address		M M / / D D / / N
City State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement	j ************************************	The Baselia Straffer the Same and the Same a
Candidate Name	Category/ Type	B.f. of a Direct of Second
Office Sought: X House Disbursement For		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Full Name (Last, First, Middle Initial)		
C.		Date of Disbursement
Mailing Address		M M / D D /
	p Code	Amount of Each Disbursement this Period
Purpose of Disbursement	Section of the	and with the color of the color of the first
Candidate Name	Refund or Disposal of Excess	
Office Sought: X House	General	Contributions Required Under 11 C.F.R. 400.53
SUBTOTAL of Disbursements This Page (optional)		250
TOTAL This Period (last page this line number only)		7.9.60

SCHEDULE C	(FEC	Form	3)
LOANS			

PAGE OF

DANS	•			for each category Detailed Summar	of the	FOR LINE NU (check only o		13a 13b
AME OF COMMITTEE (In Full) COMMITTEE TO EI	LECT LEYV	A FOR U.S	. CONGRE	ss 1	QT	2014		
LOAN SOURCE Full Name (La	ast, Filst, Mic	dre Initial)				ction:		
Leyva, Mar	ck J.				X	Primary		
Mailing Address						General Other (specify	. —	
	n Street							
City		State	ZIP Cod	e				
Highland		IN	46322					
Original Amount of Loan		Cumulative	Payment To I	Date	Balance	Outstanding at	Close of Ti	nis Period
, ,20	0,00			0-		.	200	,00
TERMS Date Incurred			Date Due		t Rate		Secured	 l:
01 31 26	14	M M / D	D / Y	Ŏ Ň E	•	Ò % (apr)	Yes	X
List All Endorsers or Guarant	ors (if any) t	o Loan Sour	ce					
1. Full Name (Last, First, Midd	dle Initial)			Name of Employer				
Mailing Address				Occupation				
				Amount Guaranteed				
City	State	ZIP Code		Outstanding:	. ,	1	•	
2. Full Name (Last, First, Midd	le Initial)			Name of Employer				
Mailing Address				Occupation				
				Amount				
City	State	ZIP Code		Guaranteed Outstanding:	. 9.	5 % -		
3. Full Name (Last, First, Midd	le Initial)			Name of Employer				
Mailing Address	-			Occupation			-	
				Amount				
City	State	ZIP Code		Guaranteed Outstanding:	. 5	3 .		
4. Full Name (Last, First, Midd	le Initial)	. 10. 10. 10. 10.		Name of Employer				
Mailing Address				Occupation				
				Amount		• •		
City	State	ZIP Code		Guaranteed Outstanding:	9:	. ,	, •	
SUBTOTALS This Period This Pa	ge (optional).			······		·. •	, Z O	0, 00
TOTALS This Period (last page in	this line onl	y)		·····		, 35	, 200 ,780	1.00
Carry outstanding balance only to	o LINE 3, Sc	hedule D, for	this line. If I	no Schedule D, car	ry forward	to appropriat	e line of Si	ummary.

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(Freedy

SCHEDULE C (FEC Form 3)

Use separate schedule(s) FOR LINE NUMBER:

PAGE

X	13a	
-		

OF

Date Incurred Date Due M.M. D. D. Y. Y. Y. Y. Y. M. M. J. D. D. J. Y. N. List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code 2. Full Name (Last, First, Middle Initial)		Election: Primary General Other (s	
Leyva, Mark J. Mailing Address 10027 4th Street City State ZIP Cod Highland IN 46322 Original Amount of Loan Cumulative Payment To D TERMS Date Incurred Date Due MIMITER DATE DISTRICT DATE DATE DATE DATE DATE DATE DATE DAT		Election: Primary General Other (s	. pecify) ▼
Leyva, Mark J. Mailing Address 10027 4th Street City State ZIP Cod Highland IN 46322 Original Amount of Loan Cumulative Payment To Date Due Date Incurred Date Due MM M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	е	Primary General Other (s	
Mailing Address 10027 4th Street City State ZIP Cod Highland IN 46322 Original Amount of Loan Cumulative Payment To II TERMS Date Incurred Date Due MM / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	e	General Other (s	
City State ZIP Cod Highland IN 46322 Original Amount of Loan Cumulative Payment To II TERMS Date Incurred Date Due M.M. / D. D. / Y.	е		
City State ZIP Cod Highland IN 46322 Original Amount of Loan Cumulative Payment To Date Incurred Date Due M. M. J. D. D. J.	е	4057	
Original Amount of Loan Cumulative Payment To Description Date Due M. M. / D. D. / Y. N List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code 2. Full Name (Last, First, Middle Initial)	е		GENERAL
Original Amount of Loan Cumulative Payment To I Q 40 60 TERMS Date Incurred Date Due M M / D D / Y N List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code 2. Full Name (Last, First, Middle Initial)			
TERMS Date Incurred Date Due M.M. / D. D. / Y. Y. Y. Z. M. M. / D. D. / Y. List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code 2. Full Name (Last, First, Middle Initial)			
TERMS Date Incurred Date Due M.M. J. J. J. Z. C. J. Z. M. M. J. D. J. N. List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code 2. Full Name (Last, First, Middle Initial)		lance Outstandi	ng at Close of This Period
Date Incurred Date Due M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	0-	5	,240.00
List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code 2. Full Name (Last, First, Middle Initial)	Interest Ra	ate	Secured:
1. Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code 2. Full Name (Last, First, Middle Initial)	Ŏ Ň Ĕ	0 % (a	pr) Yes No
Mailing Address City State ZIP Code 2. Full Name (Last, First, Middle Initial)			700 110
City State ZIP Code 2. Full Name (Last, First, Middle Initial)	Name of Employer		
2. Full Name (Last, First, Middle Initial)	Occupation		
2. Full Name (Last, First, Middle Initial)	A		
2. Full Name (Last, First, Middle Initial)	Amount Guaranteed		
	Outstanding:	,) . "
	Name of Employer		
Mailing Address	Occupation		
	Amount		
City State ZIP Code	Guaranteed		
	Outstanding:	· 3	, •
3. Full Name (Last, First, Middle Initial)	Name of Employer	-	
Mailing Address	Occupation		
	Amount		
City State ZIP Code	Guaranteed Outstanding:	5	, . •
4. Full Name (Last, First, Middle Initial)	Name of Employer	 	
Mailing Address	Occupation		
	A		
City State ZIP Code	Amount Guaranteed	•	
Oity State Zir Gode	Outstanding:	9 :	•
UBTOTALS This Period This Page (optional)	·····		24000
		,	,24000 35,580,60
OTALS This Period (last page in this line only)			THE R. P.

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE

13a

OF

			Detailed .	Summary Page			13b
AME OF COMMITTEE (In Full) COMMITTEE TO ELECT LEY	VA FOR II.S.	CONGRE		PRE	ELECT	2012	
LOAN SOURCE Full Name (Last, First, N					Pl4'	·	
Leyva, Mark J.	nddre milalj				Election: Primary		
Mailing Address					General Other (speci	fv) 🛥	
10027 4th Street				1	PRE	ZENERA	34
City	State	ZIP Code					
Highland	IN	46322					
Original Amount of Loan	Cumulative Pay	yment To D	ate	Balan	ce Outstanding a	at Close of Th	is Period
, , 36000					9 :	,360	00
TERMS							
Date Incurred	_	Date Due		Interest Rate		Secured:	
M M / B B / Y Y Y	м м , 7 о о	N	ONE		0 % (apr)	Yes	X
List All Endorsers or Guarantors (if any)	to Loan Source						
1. Full Name (Last, First, Middle Initial)			Name of En	nployer			
Mailing Address			Occupation			*	
		}	Amount		····		
City State	ZIP Code		Guaranteed Outstanding		, ,	•	•
2. Full Name (Last, First, Middle Initial)			Name of Er	mployer			
Mailing Address			Occupation				
		-	Amount	·			
City State	ZIP Code		Guaranteed Outstanding			•	
3. Full Name (Last, First, Middle Initial)			Name of Er	mployer			
Mailing Address			Occupation	I			
			Amount				
City State	ZIP Code		Guaranteed Outstanding		5 9 .	. •	
4. Full Name (Last, First, Middle Initial)			Name of Er	mployer		···	
Mailing Address			Occupation	· , 			
		<u> </u>	Amount	'-			
City State	ZIP Code		Guaranteed Outstanding		, . ,	•,	
UBTOTALS This Period This Page (optiona			••••••	··· >	,	,360 5,340	00 %
OTALS This Period (last page in this line of	nly)			··· •	, 33	5,340	00
Carry outstanding balance only to LINE 3, S	chedule D, for thi	is line. If n	o Schedule	D, carry forw	ard to appropri	ate line of Su	mmary.

				<u> </u>		T	PAGE	/ OF	2
HEDULE C (FEC Form ANS	3)			Use separate sched for each category of Detailed Summary I	f the	FOR LINE (check on	NUMBE	<u> </u>	13a
ME OF COMMITTEE (In Full) COMMITTEE TO ELEC	CT LEYVA	FOR U.S.	CONGRE	SS .		3RA	QT	20	12
LOAN SOURCE Full Name (Last,	First, Midd	he Initial)		······································	Ele	ection:			·
Leyva, Mark	J.					Primary			
Mailing Address					\dashv	General Other (spe	cify) 🕶		
10027 4th S	Street					OPEN		nitt	RE
City		State	ZIP Cod	е					
Highland		IN	46322						
Original Amount of Loan		Cumulative Pay	ment To I	Date E	Balance	Outstanding	at Close	of Thi	s Pe
, , 400	0.00	. ,	,	0-		9.	, 4	00,	O
TERMS Date Incurred		D	ate Due	Interest F	Rate		Se	cured:	
08' 13' 20i	Ž	M / D D	' Y N	Ŏ Ň Ĕ	4	0 % (apr	, [Yes	X
List All Endorsers or Guarantors	(if any) to	Loan Source						163	
1. Full Name (Last, First, Middle	Initial)		7	Name of Employer					
Mailing Address				Occupation	•				
				Amount					
City	State	ZIP Code		Guaranteed Outstanding:	3	,			•
2. Full Name (Last, First, Middle I	nitial)			Name of Employer		·			
Mailing Address				Occupation					
				Amount					
City	State	ZIP Code		Guaranteed Outstanding:	9	3		•	
3. Full Name (Last, First, Middle I	nitial)			Name of Employer		<u>.</u>	<u></u>		
Mailing Address	 			Occupation		·	· -		
				Amount					
. City	State	ZIP Code		Guaranteed Outstanding:	,	5			
4. Full Name (Last, First, Middle i	Initial)			Name of Employer					
Mailing Address				Occupation				_ .	
				Amount					
City	State	ZIP Code		Guaranteed Outstanding:	,	· •		•	
·	~~~~						<u> </u>		
UBTOTALS This Period This Page	(optional)			······		,	, 4	00	Ö
OTALS This Period (last page, in th	is line only)			·····		•	4	_	
						,	,	<u> </u>	_

SCHEDULE C (FEC Form 3)

Use separate schedule(s) for each category of the

PAGE FOR LINE NUMBER

H:	X	13a
		13b

DANS			Detailed Summary Pa		eck only on	ie) 132
ME OF COMMITTEE (In Full) COMMITTEE TO EL	ECT LEYV	FOR U.S. CON	GRESS	3R	QT	2012
LOAN SOURCE Full Name (La		dle Initial)		Election:	ary	
Leyva, Mar	K U.			Gen		
Mailing Address 10027 4th	Street				er (specify) En Co	mm1TE
City	-	State ZIP	Code			
Highland		IN 463	22			
Original Amount of Loan		Cumulative Payment	t To Date Ba	iance Outst	anding at C	Close of This Per
, , 4 =	50,00	9 .	,- 0-	7	. 9	450,0
TERMS Date Incurred		Date D	Due Interest Ra	ite		Secured:
09 10 20	iž	M M / O D /	N O N E	, 0	6 (apr)	Yes X
List All Endorsers or Guaranto		Loan Source				
Full Name (Last, First, Midd	lle Initial)		Name of Employer			
Mailing Address			Occupation			
City	State	ZIP Code	Amount Guaranteed Outstanding:		,	•
2. Full Name (Last, First, Middle	e Initial)		Name of Employer			
Mailing. Address			Occupation			
City	State	ZIP Code	Amount Guaranteed Outstanding:	3	,	4
3. Full Name (Last, First, Middle	e Initial)	· · · · · · · · · · · · · · · · · · ·	Name of Employer			
Mailing Address			Occupation			- 1
City	State	ZIP Code	Amount Guaranteed			
Oity	State	ZIF Code	Outstanding:	5 .	3	
4. Full Name (Last, First, Middle	e Initial)		Name of Employer			
Mailing Address	<u> </u>		Occupation		<u>.</u>	
City	State	ZIP Code	Amount Guaranteed			
			Outstanding:	9	5	
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SCHEDULE C (FEC Form 3) LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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NAME OF COMMITTEE (In Full)	A EOD II G GOVE	DECC	3 PD QT	2011
COMMITTEE TO ELECT LEYV		7633		·
LOAN SOURCE Full Name (Last, First, Mid	Järe Initial)		Election:	
Leyva, Mark J.			Primary General	
Mailing Address			Other (specify)	· ·
10027 4th Street				ect eyele
City	State ZIP C		Var. 11 11	
Highland	IN 4632	?2 		
Original Amount of Loan	Cumulative Payment		Balance Outstanding at	
, , 100.00	.	,-0-	t t	100.00
TERMS Date Inquired	D-1 P	linke	Pata	Scores d-
Date Incurred	Date Du	ue Interest	rate	Secured:
		NONE	. 0 % (apr)	Yes No
List All Endorsers or Guarantors (if any) t	o Loan Source		7.11	
1. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation	····	
		Amount		· · · · · · · · · · · · · · · · · · ·
City State	ZIP Code	Guaranteed Outstanding:	7 7	×
2. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
		Amount		
City State	ZIP Code	Guaranteed Outstanding:) 9	
3. Full Name (Last, First, Middle Initial)	······································	Name of Employer		
Mailing Address		Occupation		
		Amount		
City State	ZIP Code	Guaranteed Outstanding:	9 9	•
4. Full Name (Last, First, Middle Initial)		Name of Employer		**************************************
Mailing Address		Occupation		
		Amount		
City State	ZIP Code	Guaranteed Outstanding:	;	
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SCHEDULE	C	(FEC	Form	3)
LOANS				

Use separate schedule(s)

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AME OF COMMITTEE (In Full)					LQT	20		
COMMITTEE TO E	LECT LEYVA FOR U.S	. CONGRES	S	-	LXI		• I	
LOAN SOURCE Full Name (L	ast, First, Middle Initial)				Election:	_		
Leyva, Mar	rk J.			11	Primar Genera	•		
Mailing Address					> Other	(specify)	V	
10027 4tl					Non	re L. R	CT CY	
City	State	ZIP Code						
Highland	IN	46322						
Original Amount of Loan	Cumulative	Payment To Da	ate	Baland	e Outstan	ding at C	lose of Th	is Period
, ,24	10.00	, ,-0)-		,	, (240,	, 00
TERMS Date Incurred		Date Due		Interest Rate			Secured:	
03 31 26		n C	ŇĚ	•	0 %	(apr)	Yes	X
List All Endorsers or Guarante								
1. Full Name (Last, First, Mido	fle Initial)		lame of Emp	oloyer				
Mailing Address		C	ccupation		 			
		,	mount					
City	State ZIP Code		iuaranteed Outstanding:	,	ı	3		
2. Full Name (Last, First, Middl	e Initial)		lame of Emp	oloyer				
Mailing Address			ccupation					
			mount Suaranteed					
City	State ZIP Code		outstanding:	į)-	y	•	
3. Full Name (Last, First, Middle	e Initial)	1	lame of Emp	oloyer				
Mailing Address		C	ccupation					
City	Chair 710 O - 1		mount Juaranteed					
City	State ZIP Code		outstanding:	,	ı	1	•	
4. Full Name (Last, First, Middle	e Initial)	1	lame of Emp	oloyer	· · · · · · · · · · · · · · · · · · ·			
Mailing Address		6	ccupation	· · · · · · · · · · · · · · · · · · ·	· ····			
			mount			 ·		
City	State ZIP Code		iuaranteed Jutstanding:	,		,	•	
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carry outstanding balance only to	LINE 3, Schedule D, for t	his line. If no	Schedule D	, carry forwa	rd to appi	ropriate I	ine of Sun	nmary.

SCHEDULE C (FEC Form 3)

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE

LOANS	Detailed Summary I	Pa ge	(Check Only	onej	13b
NAME OF COMMITTEE (In Full) COMITTEE TO ELECT LEYVA FOR U.S. CONGR	ESS	/	'ST 97	201	5
LOAN SOURCE Full Name (Last, Firet, Middle Initial)			ction:		
Leyva, Mark, J.		X	Primary General		
Mailing Address			Other (specif	fy) ▼	
10027 4th Street					
	Code 322				
Original Amount of Loan Cumulative Payment	: To Date B	alance	Outstanding a		
, ,500 .00 ,	, - 0		,	,500	. 09
TERMS Date Incurred Date D	ue Interest R	ate		Secured	:
03 12 2010	N O N E	•	0 % (apr)	Yes	X
List All Endorsers or Guarantors (if any) to Loan Source					
Full Name (Last, First, Middle Initial)	Name of Employer				
Mailing Address	Occupation				
	Amount				,
City State ZIP Code	Guaranteed Outstanding:	,	,	.•	
2. Full Name (Last, First, Middle Initial)	Name of Employer				
Mailing Address	Occupation				
	Amount				
City State ZIP Code	Guaranteed Outstanding:	,	,	•	
3. Full Name (Last, First, Middle Initial)	Name of Employer				
Mailing Address	Occupation			·	
	Amount				<u> </u>
City State ZIP Code	Guaranteed Outstanding:	,	•	•	
4. Full Name (Last, First, Middle Initial)	Name of Employer				
Mailing Address	Occupation				
	Amount				
City State ZIP Code	Guaranteed Outstanding:	,	,	•	
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SCHED	ULE	D	(FEC	Form	3)
DEBTS	AND	0	BLIGA	TIONS	3

(Use separate schedule(s) for each numbered line)

PAGE OF J FOR LINE NUMBER: (check only one)

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Excluding Loans	numbered line)		2
NAME OF COMMITTEE (In Full)		157 OT	201
		13, 04	Sot.

COMMITTEE TO ELECT LEYVA FOR U.S. CONGRESS	130 01 5010
A. Full Name (Last; First, Middle Initial) of Dector or Creditor	Nature of Debt (Purpose):
Mark J. Leyva	1 Campitrinting
Mailing Address 10027 4th Street	Camp. Printing H. P.P.
City State Zip Code Highland IN 46322	H.V.Y.
Outstanding Balance Beginning This Period -0- Amount Incurred This Period Payment This Period	Outstanding Balance at Close of This Period
4.200	4200
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mark J. Leyva	Raffle Certificate
Mailing Address 10027 4th Street	
City State Zip Code Highland IN 46322	Blyth's Sport Shop
Outstanding Balance Beginning This Period	
-0-	
Amount Incurred This Period Payment This Period	Outstanding Balance at Close of This Period
2500 -0-	<u> </u>
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mark J. Leyva	Camp. Printing
Mailing Address 10027 4th Street	
City State Zip Code Highland IN 46322	H.P.P.
Outstanding Balance Beginning This Period -0-	
Amount Incurred This Period Payment This Period	Outstanding Balance at Close of This Period
1.0.7.0.0	1.0.7.0.0
SUBTOTALS This Period This Page (optional)	1.7.40.0
TOTALS This Period (last page this line number only)	22,963.05
TOTAL OUTSTANDING LOANS from Schedule C (last page only)	33,790.00
ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	56.753.05

SCHEDULE C (FEC Form 3) LOANS			Use separate schedu for each category of Detailed Summary P	the	FOR LINE N (check only	NUMBER: _	X 13a
NAME OF COMMITTEE (In Full)					2 . ^		
COMITTEE TO ELECT LE	YVA FOR U.S.	CONGRESS	, }	`	30 P	200	g .
LOAN SOURCE Full Name (Last, Fin	st, Middle Initial)			Elec	ction:		
Leyva, Mark, J.					Primary		
Mailing Address	 			$\dashv \overset{\sim}{\vdash}$	General Other (specif	·/ -	
10027 4th Street		•			Caror (opoon	<i>"</i> / ∀	
City	State	ZIP Cod	e				
Highland	IN	46322	!				
Original Amount of Loan	Cumulative	Payment To I	Date Ba	ılance (Outstanding a	t Close of Th	nis Period
, 1,000.	50	, ,	-0-		,	1. 600), <u>ā</u> o
TERMS Date Incurred		Date Due	Interest Ra	ate		Secured:	:
M M / D D / Y Y Y	M M / D	o / Y	Ŏ Ň Ĕ	•	0 % (apr)	Yes	X
List All Endorsers or Guarantors (if	any) to Loan Sour	rce			A	103	140
1. Full Name (Last, First, Middle Initia	al)		Name of Employer				
Mailing Address			Occupation				
City St	ate ZIP Code		Amount Guaranteed Outstanding:	,	,	•	
2. Full Name (Last, First, Middle Initial)		Name of Employer				
Mailing Address			Occupation				
			Amount Guaranteed				
City	ate ZIP Code		Outstanding:	,	,	•	
3. Full Name (Last, First, Middle Initial)		Name of Employer				
Mailing Address			Occupation		······································		
City St	ate ZIP Code		Amount Guaranteed				
			Outstanding:	•			
4. Full Name (Last, First, Middle Initial)			Name of Employer				
Mailing Address			Occupation				
City Sta	te ZIP Code		Amount Guaranteed Outstanding:	. ,	,	•	
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Carry outstanding balance only to LINE 3	Schedule D. for t	his line If as	Schadula D. carry for	ward +		line of Sun	

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SCHEDULE D (FEC Form 3)	(Use separate	PAGE OF		
DEBTS AND OBLIGATIONS	schedule(s) for each	FOR LINE NUMBER: (check only one) 9		
Excluding Loans	numbered line)	1 ' '		
NAME OF COMMITTEE (In Full)		30P 2008		
COMMITTEE TO ELECT LEYVA FOR U.S. CONGRESS				
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Debt (Purpose):		
Leyva, Mark, J.	tai	onity Mail FEE		
Mailing Address 10027 4th St.	10-	-08-2003		
City State Zip Code	CARL	ffith Post offic		
Highland IN 46322	Gas	SFIHL IN 46319		
Outstanding Balance Beginning This Period				
Amount Incurred This Period Payment This Period	Outstar	nding Balance at Close of This Period		
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the grown of grown at the extremely that the property of the contract of the extremely that the contract of th	.	, 9,40;		
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	1	Debt (Purpose):		
Leyva, Mark, J.		ST DRIVER		
Mailing Address		08-2009		
10027 4th St.		IARDS		
City State Zip Code	_	US HIGHWAY 41 RENVILLE IN 46375		
Highland IN 46322	1 500.6	RECOURTE IN 18713		
Outstanding Balance Beginning This Period				
30.79				
Amount Incurred This Period Payment This Period	Outstar	nding Balance at Close of This Period		
21.38)	, 52.17		
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	1	Debt (Purpose):		
Leyva, Mark, J.	Fo	OD TRAYS		
Mailing Address		06-2008		
10027 4th St.		ack + JANTI		
City State Zip Code Highland IN 46322		2 Cline AUE HIAND IN 46322		
Outstanding Balance Beginning This Period		77.00		
According to the control of the cont				
9 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0				
Amount Incurred This Period Payment This Period	Outstar	nding Balance at Close of This Period		
, 88.98	, , , , , , , , , , , , , , , , , , ,	, 88.98.		
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1) SUBTOTALS This Period This Page (optional)	×	,119.76		
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3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	>	33 29 0 0 0		
		55779.05		
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page of	oniv) 🗲	,, ' ' /, 03 :		

SCHEDULE	C	(FEC	Form	3)
LOANS				

Use separate schedule(s) for each category of the

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ANS	Detailed Summary Page (check only one) X 13a
ME OF COMMITTEE (In Full)	RESS 3° 07 2008
COMITTEE TO ELECT LEYVA FOR U.S. CONG	RESS U 1 2008
LOAN SOURCE Full Name (Last, First, Middle Initial)	Election:
Leyva, Mark, J.	Primary General
Mailing Address	Other (specify) ▼
10027 4th Street	
- in the second	P Code
Highland IN 4	16322
Original Amount of Loan Cumulative Payme	nnt To Date Balance Outstanding at Close of This Peri
, 1,300.00	,-0- , 1.300,00
	Due Interest Rate Secured:
M M / 12 / 200 S M M / B D /	NONE 0 % (apr) Yes
List All Endorsers or Guarantors (if any) to Loan Source	100 1
1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
20.0	Amount Guaranteed
City State ZIP Code	Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount
City State ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount
.City State ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount
City State ZIP Code	Guaranteed Outstanding:
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erry outstanding balance only to LINE 3. Schedule D. for this lin	e. If no Schedule D, carry forward to appropriate line of Summary.

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SCHEDULE D (FEC Form 3)			separate ledule(s)	FOR LINE NUMBER:
DE	BTS AND OBLIGATIONS	1	r each	(check only one) 9
	luding Loans	numt	pered line)	10
NA	ME OF COMMITTEE (In Full)		خ	200 - 0
	COMMITTEE TO ELECT LEYVA FOR U.S. CONGRESS		<u>3</u>	"QT 2008
	A. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of D	Debt (Purpose):
	Office Depot			10/2008
	Mailing Address 10332 INDIANAPOLIS BIDD City State Zip Code		Cop	Y FEES
	City State Zip Code TN 46322			
ı	Outstanding Balance Beginning This Period			
- [Les Summiliers Rose street street Boronte courts of Part works of			
1	Amount Incurred This Period Payment This Period			ing Balance at Close of This Period
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Ţ	B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of I	Debt (Purpose):
	GORDON FOOD Service		08	131/2008
- [Mailing Address			
Ì	City State Zio Code Verrillville IN 46310		PA	rade Cauly
Ī	Outstanding Balance Beginning This Period	,	•	
1	Carrier to the contract of increased selection contraction contraction of the contraction			
- [Amount Incurred This Period Payment This Period		Outetand	ing Balance at Close of This Period
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	43471	maning gament	is an arminant	43471
ľ	C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of I	Debt (Purpose):
	Bur Buttos Parts. Com		09	103/2008
	Mailing Address 350 S Campbell St Unit 3			etton Parts
-	City State 7in Code LU 46385		80	etton tarts
ļ	Outstanding Balance Beginning This Period			
	The section of the se			
	Amount Incurred This Period Payment This Period	e riji politikani ter		ing Balance at Close of This Period
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- <i>i</i>			The second of th	3229000
	TOTAL OUTSTANDING LOANS from Schedule C (last page only)			The state of the s
4)	ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page o	nly) 🕨		54659,29

SCHEDULE C (FEC Form 3) LOANS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)
NAME OF COMMITTEE (in Full) COMMITTEE TO ELECT LEYVA FOR U.	S. CONGRESS		2ND QT 2008
LOAN SOURCE Full Name (Läst, First, Middle Mark J. Leyva	e Initial)		ection: Primary General
Mailing Address 10027 4th Street			Other (specify)
	tate ZIP Code IN 46322	9	
Original Amount of Loan	Cumulative Payment To (Outstanding at Close of This Period
Date Incurred Description Des	Crospend State-of-Parametel Systems (Crospend)	Interest Rate	Secured: % (apr)
Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Guaranteed	annen zamen germen genema zenem zenem erren erren zenem erren zenem erren zenem zenem erren zenem zenem zenem Annen Estema erren Barron erren erren zenem erren zenem z
2. Full Name (Last, First, Middle Initial)		Name of Employer	······································
Mailing Address		Occupation	nt, 194-1944 - 194-1944 - 194-1944 - 194-1944 - 194-1944 - 194-1944 - 194-1944 - 194-1944 - 194-1944 - 194-194
City State	ZIP Code	Amount Guaranteed Outstanding:	aamining gaaraan garaan garaa ayaa gaaraa gaaraa gaaraa ya ah
3. Full Name (Last, First, Middle Initial)		Name of Employer	- · · · · · · · · · · · · · · · · · · ·
Mailing Address		Occupation	
City State	ZIP Code	Guaranteed	garan garan da saraje et er
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Guaranteed	e megine wert in de laar in de laar de Baar de laar d
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SCHEDULE D (FEC Form 3)	(Use separ	rate	PAGE J OF 2
DEBTS AND OBLIGATIONS	schedule	(s) FOR LIN	IE NUMBER:
Excluding Loans	for each	(5	only one) 9
NAME OF COMMITTEE (In Full)	*	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
COMMITTEE TO ELECT LEYVA FOR U.S. CONGRESS		2ND	\$1 5008
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor		re of Debt (Purpo	
Bluehost		5/15/6	•
Mailing Address 1215 North Research Way	1	fosting	
City State Zip Code (Dec) ut 84097			
Outstanding Balance Beginning This Period		- 	
08001			
Amount Incurred This Period Payment This Period	Ou	itstanding Balanc	ce at Close of This Period
1.6.680	00		16680
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Natu	re of Debt (Purp	ose):
GORDON FOOD SERVICE	17	parde.	. Candu
Mailing Address 1601 W 81st Avé	1	mande, /19/08 -	
City State Zip Code	b	127/08 -	115.54
Merrilliville IN 46410			
Outstanding Balance Beginning This Period			
23608	_		
Amount Incurred This Period Payment This Period		utstanding Balan	ce at Close of This Period
23.608	ا لسم		23608
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nati	ure of Debt (Pury	20se):
Lowes		Danda	prep. Material
Mailing Address 637 US Lighway 41		TARAGE	Prep. Malerial
City State Zip Code Shereru: lle IN 46375		6-25-	o 8
Outstanding Balance Beginning This Period			
2720			
Amount Incurred This Period Payment This Period	o	utstanding Balan	ice at Close of This Period
2,7,20			2720
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1) SUBTOTALS This Period This Page (optional)	} <u> </u>		43008
2) TOTALS This Period (last page this line number only)			
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	> [
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page	only) >	and another them by	

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SCHEDULE D (FEC Form 3)	(Use separate schedule(s) FOR LINE NUMBER:
DEBTS AND OBLIGATIONS	for each (check only one) 9
Excluding Loans	numbered line) 10
NAME OF COMMITTEE (In Full)	2ND QT 2008
COMMITTEE TO ELECT LEYVA FOR U.S. CONGRESS	
A. Full Name (Last; First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Schilling Bros. Lumber	
Mailing Address	- Harade prep. Material
8900 WICKER AUE (US41)	Parade prep. Naterial
City State Zip Code SAIN+ JOHN IN 46373	
Outstanding Balance Beginning This Period	
9632	
Amount Incurred This Period Payment This Period	Outstanding Balance at Close of This Period
9.5.3.2	9532
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Menands	
Mailing Address	Parade Paer Maleural
City State Zip Code	6/27/08
Scherenville IN 46375	
Outstanding Balance Beginning This Period	
30.79	
Amount Incurred This Period Payment This Period	Outstanding Relance at Class of This Beried
forming the state of the state	Outstanding Balance at Close of This Period
3079	30.7.9
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpase):
Menards Mailing Address	- Parade Prep Malon
City Code Roas	Parade Prep Malearal 16/28/08
City State Zip Code IN 46408	
Outstanding Balance Beginning This Period	
26684	
In a statement of the s	Outstanding Polence of Olege of This Poles
Amount Incurred This Period Payment This Period	Outstanding Balance at Close of This Period
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	20.00
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	3099000
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page	only) > 5,246296

SCHEDULE C (FEC Form 3)

Use separate schedule(s) FOR LINE NUMBER:

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AME OF COMMITTEE (In Full) COMITTEE TO ELECT LEYVA FOR U.S. CONGRESS LOAN SOURCE FLb Name (Lbst, First, Middle Initial) Leyva, Mark, J. Mailing Address 10027 4th Street City State ZIP Code Highland IN 46322 Original Amount of Loan Cumulative Payment To Date , IOO.OO , ON E TERMS Date Incurred Date Due Interest M M / OO / Y Y Y Y M M / OO N E List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address City State ZIP Code Guaranted Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address City State ZIP Code Outstanding: Amount Guaranteed Outstanding: Amount Guaranteed Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address City State ZIP Code Outstanding: Amount Guaranteed Outstanding:	gory of the mary Page (check only one) X 13.
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City State ZIP Code Highland IN 46322 Original Amount of Loan Cumulative Payment To Date , , , , , , , , , , , , , , , , , , ,	Election: Primary General
City State ZIP Code Highland IN 46322 Original Amount of Loan Cumulative Payment To Date , , , , , , , , , , , , , , , , , , ,	Other (specify)
Highland IN 46322 Original Amount of Loan Cumulative Payment To Date , , , , , , , , , , , , , , , , , , ,	
Original Amount of Loan Cumulative Payment To Date , , , , , , , , , , , , , , , , , , ,	
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Date Incurred Date Due Interes Interes Interes Date Due Interes Interes Date Due Interes Interes Interes Date Due Interes Intere	, , 1 00 00
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OTALS This Period (last page in this line only)	, ,100.00 , 29.290.00

SCHEDULE D (FEC Form 3) **DEBTS AND OBLIGATIONS**

(Use separate schedule(s) for each numbered line)

PAGE / OF FOR LINE NUMBER: (check only one) 9

Excluding Loans		
NAME OF COMMITTEE	(In	Full)

10

COMMITTEE TO ELECT	LEYVA FOR U.S. CONGRESS	12-7 2008
A. Full Name (Last, First, Middle initial) of D	eptor or Creditor	Nature of Debt (Purpose):
Office Depo	\	4/3/08
Mailing Address 10332 In	dianapolis Blvd	Camp. FlyerPrinting
City State 1+ighland 1	Zip Code N 46322	
Outstanding Balance Beginning This Perio	1	
2039589		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
9.780		20,4,9,3,6,9
B. Full Name (Last, First, Middle Initial) of De	ebtor or Creditor	Nature of Debt (Purpose):
Office Dopo	+	4/10/08
Mailing Address 10332 Ind	ianapolis Blud.	Card Stock
City State Hahland	ianafolis Blud. Ip Code N 46322	
Outstanding Balance Beginning This Perio		
	7	
2049369	<u> </u>	
2049369 Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
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Amount Incurred This Period		Service depart of laws and percentinent and experience of service laws and broken desired
Amount Incurred This Period		2058993 Nature of Debt (Purpose): 4/15/08
Amount Incurred This Period	Debtor or Creditor	2058993 Nature of Debt (Purpose): 4/15/08
Amount Incurred This Period 9624 C. Full Name (Last, First, Middle Initial) of D Mailing Address City Amount Incurred This Period 9624 C. Euli Name (Last, First, Middle Initial) of D Mailing Address	Debtor or Creditor VUCK 72 ND Circle State Zip Code	2058993 Nature of Debt (Purpose):
Amount Incurred This Period 9624 C. Full Name (Last, First, Middle Initial) of D Mailing Address 109 W.	Debtor or Creditor CLUCK 72 ND Circle State Zip Code 1N 46410	2058993 Nature of Debt (Purpose): 4/15/08
Amount Incurred This Period 9624 C. Full Name (Last, First, Middle Initial) of D Oliver Cu Mailing Address 109 W. City Werrillville	Debtor or Creditor CLUCK 72 ND Circle State Zip Code 1N 46410	2058993 Nature of Debt (Purpose): 4/15/08
Amount Incurred This Period Q Q 2 4 C. Full Name (Last, First, Middle Initial) of E Mailing Address City Werrillyille Outstanding Balance Beginning This Period	Debtor or Creditor CLUCK 72 ND Circle State Zip Code 1N 46410	2058993 Nature of Debt (Purpose): 4/15/08
Amount Incurred This Period 9624 C. Full Name (Last, First, Middle Initial) of D Mailing Address 109 W. City Werrillville Outstanding Balance Beginning This Perio	Debtor or Creditor LUCK 72 ND Circle State Zip Code 1N 46410	2058993 Nature of Debt (Purpose): 4115/08 Flyer Printing
Amount Incurred This Period Q Q 2 4 C. Full Name (Last, First, Middle Initial) of D Mailing Address City Merrillyille Outstanding Balance Beginning This Period Amount Incurred This Period	Debtor or Creditor LUCK 72 ND Circle State Zip Code 1N 46410	2058993 Nature of Debt (Purpose): 4/15/08 Flyer Printing Outstanding Balance at Close of This Period
Amount Incurred This Period Q Q 2 4 C. Full Name (Last, First, Middle Initial) of D Mailing Address City Merrillyille Outstanding Balance Beginning This Period Amount Incurred This Period	Debtor or Creditor VUCK 72 ND Circle State Zip Code 1N 46410	Nature of Debt (Purpose): 4/15/08 Flyer Printing Outstanding Balance at Close of This Period 2064993
Amount Incurred This Period Q 6 2 4 C. Full Name (Last, First, Middle Initial) of D Mailing Address City Werrillyille Outstanding Balance Beginning This Period Amount Incurred This Period	Debtor or Creditor UCK 72 ND Circle State Zip Code 1N 46410 Payment This Period	Nature of Debt (Purpose): 4/15/08 Flyer Printing Outstanding Balance at Close of This Period 2064993
Amount Incurred This Period 9624 C. Full Name (Last, First, Middle Initial) of D Mailing Address City Merrillville Outstanding Balance Beginning This Period Amount Incurred This Period Amount Incurred This Period 1) SUBTOTALS This Period This Page (options)	Debtor or Creditor VCK 72 VP Circle State Zip Code 1N 46410 Payment This Period Payment This Period	Nature of Debt (Purpose): 4/15/08 Flyer Printing Outstanding Balance at Close of This Period 2064993

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CHEDULE C (FEC Form OANS	3)	Use separate schedu for each category of Detailed Summary Pa	the (check only one) V 13s
IAME OF COMMITTEE (In Full)			1st QT 2008
COMITTEE TO ELECT 1	LEYVA FOR U.S. CONGRI	ESS	
LOAN SOURCE Full Name (Last, I			Election: X Primary
Leyva, Mark, J)		General
Mailing Address 10027 4th Street	et		Other (specify) ▼
City	State ZIP	Code	
Highland	IN 463	322	
Original Amount of Loan	Cumulative Payment	To Date Ba	alance Outstanding at Close of This Per
2,000	. 00	<u>,</u> -0-	, 2,000-00
TERMS Date Incurred	Date D		ite Secured:
03 19, 200	у мм/, о /, В	N O N E	. 0 % (apr)Yes
List All Endorsers or Guarantors (if any) to Loan Source		
1. Full Name (Last, First, Middle In	itial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	, , -
2. Full Name (Last, First, Middle Init	ial)	Name of Employer	
Mailing Address		Occupation	
	· · · · · · · · · · · · · · · · · · ·	Amount	
City	State ZIP Code	Guaranteed Outstanding:	, , .
3. Full Name (Last, First, Middle Init	iai)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	, ,
4. Full Name (Last, First, Middle Init	al)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	, ,
UBTOTALS This Period This Page (op	tional)		2,000.00
OTALS This Period (last page in this li	ne only)		29,190.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHED	ULE D	(FEC	Form	3)
DEBTS	AND O	BLIGA	TIONS	ì

(Use separate schedule(s) for each numbered line) PAGE 1
FOR LINE NUMBER: (check only one)

ХC	cluding Loans		red line)	(Crieck Orlly	<u> </u>	10
	ME OF COMMITTEE (In Full) COMMITTEE TO ELECT LEYVA FOR U.S. CONGRESS			1st QT	2008	
٦,	A. Full Name (Last; First, Middle Initial) of Debtor or Creditor	N	ature of D	Pebt (Purpose):		
	BuyButtonParts.com		Butto	n Parts	1/31, \$62.54	
L	Malling Address 350 S, Campbell St., Unit #3				ψU∠•3⁴	7
	City State Zip Code Valparaiso IN 46385					
	Outstanding Balance Beginning This Period 2 0, 3 3 3 .3 .5				_	
	Amount Incurred This Period Payment This Period	<u>, </u>	Outstandi	ing Balance at	Married Married	This Period
		<u></u>	Incolumnia			
	B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		secure of L	Debt (Purpose):	i .	
f	Mailing Address					
t	City State Zip Code					
	Outstanding Balance Beginning This Period		6		. 6:	
	Amount Incurred This Period Payment This Period		Outstand	ling Balance at	t Close o	This Period
-	C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		lature of [Debt (P urp ose)):	
}	Mailing Address					
	City State Zip Code					
	Outstanding Balance Beginning This Period	L				
	Amount Incurred This Period Payment This Period		Outstand	ling Balance at	t Close o	f This Period
1)	SUBTOTALS This Period This Page (optional)	▶			garden.	
2)	TOTALS This Period (last page this line number only)	>		2.0	39	5.89
3)	TOTAL OUTSTANDING LOANS from Schedule C (last page only)	>	markenski markenski	2.9	, 1, 9	0.00
4)	ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page on	nly) 🕨		4,9	, 5, 8	5.89

SCHEDULE D (FEC Form 3) DEBTS AND OBLIGATIONS

(Use separate schedule(s) for each numbered line) PAGE / OF
FOR LINE NUMBER:
(check only one)

EDIS AND OBLIGATIONS	for each	(check only one)	9
Cluding Loans AME OF COMMITTEE (In Full)	numbered line)	<u> </u>	10
COMMITTEE TO ELECT LEYVA FOR U.S. CONGRESS		3RD QT	
A. Full Name (Last, First, Middle Initial) of Deotof or Creditor Leyva, Mark, J. Mailing Address 10027 4th Street City State Zip Code 14:322 Outstanding Balance Beginning This Period 21,173,35 Amount Incurred This Period Payment This Period 8,43.4	8/6 - 9/7 - Pers	Hebt (Purpose): 04/00, C.C. Payman #273 #270 #300 onal Check ring Balance at Close of 20,330 Pebt (Purpose):	This Period
Mailing Address City State Zip Code		, , ,	
Outstanding Balance Beginning This Period Amount Incurred This Period Payment This Period C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		ing Balance at Close of	This Period
Mailing Address City State Zip Code			
Outstanding Balance Beginning This Period Amount Incurred This Period Payment This Period	Outstandi	ng Balance at Close of	This Period
SUBTOTALS This Period This Page (optional)	accordance along	2033	235
ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)		4.7,5.20	235
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SCHEDULE C (FEC Form 3) LOANS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only
	Detailed Summary Page	

	PAGE	1	OF	1
FOR LIN (check o		BER:	X	13a

DANS				Detailed S			(check only	one)	X 13a 13b
AME OF COMMITTEE (In FO	-	J.S. CONGRE	ESS			2	AD QT	Z <i>0</i> 0	7
LOAN SOURCE Full Nar	ne (Last, First, Midd	de Initial)				Elec	ction:		
Mark J.	Leyva						Primary General		
Mailing Address						X	Other (specify		
	th Street	<u></u>					No	n-Elec	tion_
City Highlan		State IN	ZIP Code 46322						¢
Original Amount of Loan	to the state of th	Cumulative Pay	ment To D	ate			Outstanding at		
	300.00	and and and a	dende de	-0-		and a		300	
TERMS Date Incur	red	D	ate Due	40.40	Interest	Rate	wend.	Secure	ed:
0.5 2.1	2.0.0.7	M / D D	N.O	NE		0% , , , , , , , , , , , , , , , , , , ,	% (apr)	1	No X
List All Endorsers or Gu		Loan Source	r	lama of Fra	mla van	<u> </u>	 		
1. Full Name (Last, First,	, Middle Initial)		"	lame of Em	ipioyer				
Mailing Address			(Occupation			· · · · · · · · · · · · · · · · · · ·		
City	State	ZIP Code		Amount Guaranteed Dutstanding:		andria. Sico	and and analysis and the second of the secon	•	a particular y
2. Full Name (Last, First,	Middle Initial)		1	Name of Em	npioyer				
Mailing Address				Occupation				-	
City	State	ZIP Code		Amount Guaranteed Outstanding		m.lanSha	agramation in the inch	atter of glasters, Lybers an	agricultura ga
3. Full Name (Last, First,	Middle Initial)			Name of Em	nployer				
Mailing Address	·····	····		Occupation	——————————————————————————————————————	· · · · · · · · · · · · · · · · · · ·			
City	State	ZiP Code		Amount Guaranteed Outstanding	- Procesor	roes fareis erigium	raguianis qua come que en e a que	t sant afansan alle ara as	Appropriate of
4. Full Name (Last, First,	Middle Initial)	 	1	Name of Em	ployer	-			
Mailing Address				Occupation					,
City	State	ZIP Code		Amount Guaranteed	ann sgan	- Constitution of the second	araystanik ayahdan (************************************	Pur utanggan Galangassara	a. ex-comp
- City	GIAID	2.IF 0008		Outstanding			allowed and Bosonia	tion in the second Beauty	in and
SUBTOTALS This Period Th	is Page (optional)		***************************************		· >	•	เมื่อเลารัฐเสียเกราะรู้ ของเราะรู้ 1000 ของเราะรู้เสียเกราะรู้ 1000 เราะรู้ 1000 เมื่อเลยเลาสู่เสราะรู้ 1000 เราะรู้ 1000	3 0 0	- 0 0
OTALS This Period (last pa						Land	2.7	, 19(0.00
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SCHEDULE D (FEC Form 3) DEBTS AND OBLIGATIONS

(Use separate schedule(s) for each numbered line) PAGE 1 OF 1
FOR LINE NUMBER:
(check only one)

coluding Loans	for each (check only one) 9 numbered line)
IAME OF COMMITTEE (In Full)	1 10
COMMITTEE TO ELECT LEYVA FOR U.S. CONGRESS	AND QT 2007
A. Full Name (Last; First, Middie midal) of Debtor or Creditor	Nature of Debt (Purpose):
Leyva, Mark, J.	FEC Postage _ 5/17/07 Paid Cash
Mailing Address 10027 4th Street	ratu Casil
City State Zip Code Highland IN 46322	
Outstanding Balance Beginning This Period	
2,0,5,5,2,7,0	
Amount Incurred This Period Payment This Period	Outstanding Balance at Close of This Period
1 4 4 0 -0-	2 0, 56 7 .1 0
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Leyva, Mark, J.	FEC Postage - 5/30/07
Mailing Address 10027 4th Street	Paid Cash
City State Zip Code Highland IN 46322	
Outstanding Balance Beginning This Period	
20,567.10	·
Amount Incurred This Period Payment This Period	Outstanding Balance at Close of This Period
1 6. 2 5	20,583.35
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Leyva, Mark, J.	Camp. CC Payment - 6/07/07
Mailing Address 10027 4th Street	Personal Check \$290.00 Camp. CC Payment - 4/17/07
City State Zip Code Highland IN 46322	Camp. Ct Payment - 4/17/07 Camp. Check \$300.00
Outstanding Balance Beginning This Period	
20,583.35	
Amount Incurred This Period Payment This Period	Outstanding Balance at Close of This Period
5 9 0 .0 0	0- 21,173.35
<u> </u>	To the state of the second flower with a second and the second of the second se
1) SUBTOTALS This Period This Page (optional)	Lance of months and property and the property of the property
2) TOTALS This Period (last page this line number only)	21, 173 3 35 separate control placement of the control of the cont
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	27, 190.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page of	10 262 25

SCHEDULE	C	(FEC	Form	3)
LOANS				

Use separate schedule(s)

PAGE FOR LINE NUMBER:

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DANS		for each category of Detailed Summary P		(check only	one)		13a 13b
AME OF COMMITTEE (In Full)				ST AT	200	·	
COMITTEE TO ELECT LEYVA	FOR U.S. CONGRESS	S	I	ST QT	200 /		
Leyva, Mark, J.	dle Initial)			tion: Primary General			
Mailing Address				Other (speci	fy) ₩		
10027 4th Street					ection		
City	State ZIP Cod	de					
Highland	IN 46322	2		·			
Original Amount of Loan	Cumulative Payment To	Date Ba	alance C	Outstanding a			
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TERMS Date Incurred	Date Due	Interest Ra	ate		Secure	ed:	
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List All Endorsers or Guarantors (if any) t	to Loan Source						
1. Full Name (Last, First, Middle Initial)		Name of Employer					
Mailing Address		Occupation	-				
City State	ZIP Code	Amount Guaranteed Outstanding:	,	,	•		
2. Full Name (Last, First, Middle Initial)		Name of Employer					
Mailing Address		Occupation				•	
City State	ZIP Code	Amount Guaranteed	3	,	•	•	 -
3. Full Name (Last, First, Middle Initial)		Outstanding: Name of Employer	•	· · · · · · · · · · · · · · · · · · ·	-		
					··· -		·
Mailing Address		Occupation		· · · · · · · · · · · · · · · · · · ·			
City State	ZIP Code	Amount Guaranteed Outstanding:	. 9	,			
4. Full Name (Last, First, Middle Initial)		Outstanding: Name of Employer					
Mailing Address		Occupation					
		Amount	<u> </u>		* **		
City State	ZIP Code	Guaranteed Outstanding:	,	,	•		
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SCHEDULE	C	(FEC	Form 3)
LOANS				

Use separate schedule(s) FOR LINE NUMBER:

PAGE

OF 5

OANS		for each category of the Detailed Summary Page	(check only one) X 13a
AME OF COMMITTEE (In Full)		, 	
COMITTEE TO ELECT LEYVE	A FOR U.S. CONGRESS	}	1 ST QT 2007
LOAN SOURCE Full Name (Last, First, N	Middle Initial)	E	lection:
Leyva, Mark, J.		}-	Primary General
Mailing Address		2	Cother (specify) ▼
10027 4th Street			Non-Election
City	State ZIP Cod		
Highland	IN 46322		
Original Amount of Loan	Cumulative Payment To	Date Balance	e Outstanding at Close of This Period
, , , 2 0 0 , 0 0	1 3	-0-	, ,200.00
TERMS Date Incurred	Date Due	Interest Rate	Secured:
02 05 2007	мм / D D / Y	ŎŇĔ.	0 % (apr) Yes No
List All Endorsers or Guarantors (if any) to Loan Source		NO.
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City State	ZIP Code	Guaranteed Outstanding:	,
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount Guaranteed	
City State	ZIP Code	Outstanding:	, y •
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City State	ZIP Code	Guaranteed Outstanding:	,
4. Full Name (Last, First, Middle Initial)		Name of Employer	· · · · · · · · · · · · · · · · · · ·
Mailing Address		Occupation	
		Amount	
City State	ZIP Code	Guaranteed Outstanding:	3
SUBTOTALS This Period This Page (optional	i)		, 200.00
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Carry outstanding balance only to LINE 3, S	schedule D, for this line. If r	o Schedule D, carry forwar	d to appropriate line of Summary.

SCHEDULE C. (FEC Form 3) LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 3
FOR LINE NUMBER: (check only one)

X 13a

DANS			Detailed Summary	Page	(CHECK OTHY	51(e)	13b
AME OF COMMITTEE (In Full)					ST	QT 20	07
COMITTEE TO EL			S			GC 1	
LOAN SOURCE Full Name	(Last, First, Middle Ir	nitial)		Elec	ction:		
Leyva, Mar	k, J.				Primary General		
Mailing Address				X	Other (speci		
10027 4th					Non-	Election	
City	State						
Highland	IN	4632	2				
Original Amount of Loan	Cur	nulative Payment To	Date	Balance	Outstanding a	at Close of T	his Period
, ,2	00,00	y	, -0-		,	,200	.0 0
TERMS Date Incurred		Date Due	Interest	Rate		Secureo	l:
0 2 0 8 2	0 0 7	, o o , y	IŎŇĔ	•	0 % (apr)	Yes	X
List All Endorsers or Guara	intors (if any) to Loa	an Source					
1. Full Name (Last, First, M	iddle Initial)		Name of Employer				
Mailing Address	<u>,, </u>		Occupation				
City	State ZI	P Code	Amount Guaranteed				
Oity			Outstanding:	5.	5	-	
2. Full Name (Last, First, Mic	ddle Initial)		Name of Employer				
Mailing Address			Occupation				
			Amount Guaranteed				
City	State ZI	P Code	Outstanding:	,	,		
3. Full Name (Last, First, Mid	ddle Initial)		Name of Employer				
Mailing Address			Occupation				
			Amount	·· ·			
City	State ZI	Code	Guaranteed Outstanding:	,	7	•	
4. Full Name (Last, First, Mic	ddle Initial)		Name of Employer				····
Mailing Address			Occupation				
			Amount	_ , _	·		··.
City	State ZI	P Code	Guaranteed Outstanding:	,	,	•	
<u> </u>			<u></u>			*************************************	
SUBTOTALS This Period This F	Page (optional)		······		,	,200	, 0 0
OTALS This Period (last page	in this line only)		······		3	7	•
Carry outstanding balance only	to LINE 3. Schedule	D. for this line. If	no Schedule D. carry	forward	to appropria	te line of Su	ımmarv.

SCHEDULE C (FEC Form 3) LC

Use separate schedule(s) FOR LINE NUMBER:

PAGE

DANS		for each category of the Detailed Summary Page	(check only one)	X 13a 13b
AME OF COMMITTEE (In Fuil)			1 ST 0-	
COMITTEE TO ELECT LEYVA	FOR U.S. CONGRESS	3	1 ST QT ZO	ククフ
LOAN SOURCE Full Name (Last, First, M	iddle Initial)	E	Election:	
Leyva, Mark, J.		-	Primary General	
Mailing Address			X Other (specify) ▼	
10027 4th Street			Non-Electi	<u>on</u>
City	State ZIP Cod	de		
Highland	IN 4632	2	·	
Original Amount of Loan	Cumulative Payment To	Date Balance	e Outstanding at Close of	This Period
, ,29000	,	,-0-	, ,290	.00
TERMS Date Incurred	Date Due	Interest Rate	Secur	ed:
0 3 0 6 2 0 0 7	M M / D D / Y	ŎŇĔ.	0 % (apr)	es No
List All Endorsers or Guarantors (if any)	to Loan Source			110
Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
		Amount		
City State	ZIP Code	Guaranteed Outstanding:	, ,	
2. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
		Amount		
City State	ZIP Code	Guaranteed Outstanding:	. 5	
3. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
		Amount		
City State	ZIP Code	Guaranteed Outstanding:	, .	
4. Full Name (Last, First, Middle Initial)		Name of Employer		·
Mailing Address		Occupation		
		Amount		
City State	ZIP Code	Guaranteed Outstanding:	, .	
<u> </u>		·		<u> </u>
UBTOTALS This Period This Page (optional).		······	, , 890	. 0 0
OTALS This Period (last page in this line onl	y)		, 26,890	. 00
carry outstanding balance only to LINE 3. Sc	hedule D. for this line If r	no Schedule D. carry forwar	d to appropriate line of S	Summary

SCHEDULE C (FEC Form 3) LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE

X	13a
	13b

OF

<u> </u>		Detailed Summary Pag	13b
IAME OF COMMITTEE (in Full) COMMITTEE TO ELECT LEYVA FO	OR U.S. CONGRESS		1 ST QT 2007
LOAN SOURCE Full Name (Last, First,	Middle Initial)		Election:
Mark J. Leyva			Primary General
Mailing Address			Other (specify) Verevious Election
10027 4th Street			Previous Election
City	State ZIP Co		
Highland	IN 46322	2	· · · · · · · · · · · · · · · · · · ·
Original Amount of Loan	Cumulative Payment To		ance Outstanding at Close of This Period
26,000.00		-0-	,2,6,,0,0,0,0,0
TERMS Date Incurred	Date Due	Interest Rate	e Secured:
01'01'2002		.0.06 0%	% (apr) No X
List All Endorsers or Guarantors (if an	y) to Loan Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	e ZIP Code	Amount Guaranteed Outstanding:	المعالمة ال والمعالمة المعالمة ا والمعالمة المعالمة
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	e ZIP Code	Amount Guaranteed Outstanding:	and the state of t
3. Full Name (Last, First, Middle Initial)	· · · · · · · · · · · · · · · · · · ·	Name of Employer	
Mailing Address		Occupation	

ZIP Code

ZIP Code

State

State

Amount Guaranteed

Outstanding:

Occupation

Guaranteed

Outstanding:

Amount

Name of Employer

City

City

Mailing Address

4. Full Name (Last, First, Middle Initial)

SCHEDULE D (FEC Form 3) D

(Use separate

PAGE 1 OF 1

EBTS AND OBLIGATIONS coluding Loans			edule(s) each ered line)	FOR LINE NUMBER: (check only one) 10	
IAME OF COMMITTEE (In Full) COMMITTEE TO ELECT LET	(VA FOR U.S. CONGRESS	<u></u>		15T QT 2007	
A. Full Name (Last, First; Middle Initial) of Debtor	ror Creditor	1	Nature of D	ebt (Purpose):	
Leyva, Mark J.			Campaign Debt		
Mailing Address 10027 4th Street			_		
City State Highland IN	Zip Code 46322			i	
Outstanding Balance Beginning This Period					
21, 242.70					
Amount Incurred This Period	Payment This Period	-	Outstandi	ng Balance at Close of This Period	
-0-	690.	0.0		2 0,5 5 2. 7 0	
B. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		Nature of D	Debt (Purposé):	
Mailing Address					
City State	Zip Code				
Outstanding Balance Beginning This Period Amount Incurred This Period	Payment This Period	ista karrystikkona Il Demosilior esia d	Outstand	ing Balance at Close of This Period	
C. Full Name (Last, First, Middle Initial) of Debto	r or Creditor		Nature of [Debt (Purpose):	
Mailing Address					
City	State Zip Code				
Outstanding Balance Beginning This Period	Payment This Period	activity and	Outstand	ing Balance at Close of This Period	
1) SUBTOTALS This Period This Page (optional)		>	المسالات الما	Carring Carring Carring Continues of Carring C	
2) TOTALS This Period (last page this line number only)			in and least the second	20,552.70	
3) TOTAL OUTSTANDING LOANS from Schedule	C (last page only)	>	Lancobasson's	26,890.00 	
ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)					

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